

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	MENISCAL REPAIR SCAFFOLD
Attorney Docket Number::	022956-0259
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	5
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Stephanie
Middle Name::	M.
Family Name::	Kladakis
City of Residence::	Watertown
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	56 Boylston Street
City of mailing address::	Watertown
State or Province of mailing address::	MA
Postal or Zip Code of mailing address::	02472

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Steven
Middle Name:: M.
Family Name:: Bowman
City of Residence:: Sherborn
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 26 Woodland Street
City of mailing address:: Sherborn
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 01770

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name:: R.
Family Name:: Steckel
City of Residence:: Norwalk
State or Province of Residence:: CT
Country of Residence:: US
Street of mailing address:: 21 Possum Lane
City of mailing address:: Norwalk
State or Province of mailing address:: CT
Postal or Zip Code of mailing address:: 06854

Correspondence Information

Correspondence Customer Number:: 021125

Representative Information

Representative Customer Number:: 021125
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